

AMENDMENTS TO THE CLAIMS

This listing of the claims will replace all prior versions and listings of claims in the application:

LISTING OF CLAIMS:

Claim 1. (Previously Presented) A method of treating viral encephalitis in a patient, comprising administering to the patient an effective amount of an agent that inhibits binding of leukocytes to brain endothelial cells via leukocyte surface antigen alpha-4 integrin, wherein said patient is free of multiple sclerosis.

Claim 2. (Original) The method of claim 1, wherein the agent is administered to the patient after viral infection.

Claim 3. (Original) The method of claim 2, wherein the patient is asymptomatic.

Claim 4. (Original) The method of claim 2, wherein the patient shows symptoms of encephalitis.

Claim 5. (Original) The method of claim 1, wherein the agent is administered prophylactically to a patient at risk of infection by a virus causing encephalitis.

Claim 6. (Original) The method of claim 1, wherein the virus is a herpes virus or an arbovirus.

Claim 7. (Original) The method of claim 1, further comprising monitoring the patient for symptoms of encephalitis.

Claim 8. (Original) The method of claim 1, wherein the agent specifically binds to the alpha-4 as a subunit of VLA-4.

Claim 9. (Original) The method of claim 8, wherein the agent is an antibody.

Claim 10. (Original) The method of claim 9, wherein the antibody is a Fab fragment.

Claim 11. (Original) The method of claim 8, wherein the agent binds to an epitope of the alpha-4 subunit formed by association with a beta-1 subunit in an alpha-4 beta-1 complex and lacking in an alpha-4 beta-7 complex.

Claim 12. (Original) The method of claim 9, wherein the antibody is a humanized antibody.

Claim 13. (Previously Presented) The method of claim 12, wherein the humanized antibody is characterized by a light chain variable domain designated SEQ. ID. No. 1 and a heavy chain variable domain designated SEQ. ID. No. 2.

Claim 14. (Original) The method of claim 1, further comprising administering an antiviral agent to the patient.

Claim 15. (Original) The method of claim 1, further comprising administering an antiinflammatory agent to the patient.

Claim 16. (Original) The method of claim 1, wherein the agent is formulated with a carrier as a pharmaceutical composition.

Claim 17. (Original) The method of claim 1, wherein the patient is a pediatric patient.

Claim 18. (Previously Presented) A method of treating viral encephalitis in a patient, comprising administering to the patient an effective amount of an agent that inhibits leukocyte adhesion to brain endothelial cells.

Claim 19. (Canceled)

Claim 20. (Previously Presented) A method of treating viral encephalitis in a patient, comprising administering to the patient an effective amount of an agent that inhibits binding of leukocytes to brain endothelial cells via leukocyte surface antigen alpha-4 integrin, wherein said patient is free of multiple sclerosis, and further wherein said agent comprises antibodies that bind the alpha-4 subunit of VLA-4.

Claim 21. (Withdrawn) A method of treating viral encephalitis in a patient, comprising administering to the patient an effective amount of an agent that inhibits binding of leukocytes to brain endothelial cells via leukocyte surface antigen alpha-4 integrin, wherein said patient is free of multiple sclerosis, and further wherein said agent comprises peptides and peptide derivatives that have binding affinity for VLA-4.

Claim 22. (Withdrawn) A method of treating viral encephalitis in a patient, comprising administering to the patient an effective amount of an agent that inhibits binding of leukocytes to brain endothelial cells via leukocyte surface antigen alpha-4 integrin, wherein said patient is free of multiple sclerosis, and further wherein said agent comprises peptides of SEQ ID NOS: 3-5.